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## PART B - FEE(S) TRANSMITTAL

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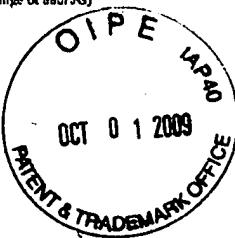
or Fax (571) 273-2885

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7900 07/17/2009  
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Chris Harrison	(Depositor's name)
<i>Chris Harrison</i>	(Signature)
10/11/09	(Date)

APPLICATION NO	FILING DATE	FIRST NAME/INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO
10/685,352	10/14/2003	George C. Valley	HRL 12K	1230

TITLE OF INVENTION: METHOD, APPARATUS, AND COMPUTER PROGRAM PRODUCT FOR SIMULATION OF MIXED-SIGNAL SYSTEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	10/19/2009
				10/02/2009 MBELETE2	00000040 503984	10685352
EXAMINER	ART UNIT	CLASS-SUBCLASS		01 FC:1501	1510.00 DA	
ALIJUA, SAIF A	2128	703-002000		02 FC:1504	300.00 DA	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Tope McKay**

2.

3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE:

**HLR Laboratories**  
**Aerospace Corporation**

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Malibu, CA.**  
**Los Angeles, CA.**

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

## 4a. The following fee(s) are submitted:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3984 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

9/30/2009

Typed or printed name

George R. Rapacki

Registration No.

60,770

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